



Election # 16  
10/19/01/aw

PATENT  
Attorney Docket No. SLP-005  
(7223/10)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

APPLICANT: Lovell *et al.*  
SERIAL NO.: 09/328,120                      GROUP NO.: 3761  
FILING DATE: June 8, 1999                      EXAMINER: Dawson, G.  
TITLE: Nose Mask

Assistant Commissioner for Patents  
Washington, D.C. 20231

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**RESPONSE TO RESTRICTION REQUIREMENT**

Dear Sir:

This paper responds to the Restriction Requirement, mailed from the U.S. Patent and Trademark Office on September 14, 2001, in connection with the patent application identified above.

**REMARKS**

The Examiner has required Applicants to elect one of two perceived inventive concepts to which the claims must be restricted: claims 1-18 (Group I), drawn to a nasal mask and system, classified in class 128, subclass 207.13, and claims 19-24 (Group II), drawn to a seal for a mask, classified in class 128, subclass 207.13.

Applicants hereby elect with traverse the claims of Group II, namely, claims 19-24. Applicants traverse the restriction requirement because a search for publications relating to any one of Groups I or II would reveal publications relating to the other Group and thus would not impose a serious burden on the Examiner. Thus, Applicants respectfully request that the restriction requirement be withdrawn.

Applicants respectfully request that the application now proceed promptly to examination. Applicants believe that no additional fees are necessitated by the present


Response. However, in the event that any additional fees are due, the Commissioner is hereby authorized to charge any such fees to Deposit Account No. 20-0531.

Date: October 12, 2001  
Reg. No. 45,508

Tel. No.: (617) 248-7226  
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2194616-1

Respectfully submitted,



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# TRANSMITTAL FORM



Application Serial Number	094,120
Filing Date	June 8, 1999
First Named Inventor	Lovell
Group Art Unit	3761
Examiner Name	Dawson, G.
Attorney Docket No.	SLP-005 (7223/10)
BATCH NO. (after allowance)	Not applicable
Patent No.	Not applicable
Issue Date	Not applicable

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## ENCLOSURES (check all that apply)

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Check Attached<br><input type="checkbox"/> Copy of Fee Transmittal Form<br><br><input type="checkbox"/> Amendment/Response<br><input type="checkbox"/> Preliminary<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]<br><br><input type="checkbox"/> Petition for Extension of Time<br><br><input type="checkbox"/> Supplemental Information Disclosure Statement<br><input type="checkbox"/> Form PTO-1449<br><input type="checkbox"/> A Copy of IDS Citation (A119)<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Sequence Listing submission<br><input type="checkbox"/> Paper Copy/CD<br><input type="checkbox"/> Computer Readable Copy<br><input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)<br><br><input type="checkbox"/> Formal Drawing(s)<br><br><input type="checkbox"/> Request For Continued Examination (RCE) Transmittal<br><br><input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application<br><br><input type="checkbox"/> Small Entity Statement<br><br><input type="checkbox"/> CD(s) for large table or computer program<br><br><input type="checkbox"/> Amendment After Allowance<br><br><input type="checkbox"/> Request for Certificate of Correction<br><input type="checkbox"/> Certificate of Correction (in duplicate) | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences<br><br><input type="checkbox"/> Appeal Brief (in triplicate)<br><br><input type="checkbox"/> Status Inquiry<br><br><input checked="" type="checkbox"/> Return Receipt Postcard<br><br><input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8<br><br><input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8<br><br><input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below)<br><br>Response to Restriction Requirement |
|--|--|---|

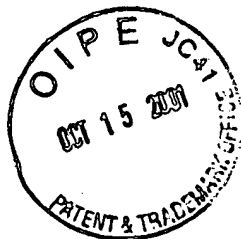
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## SIGNATURE BLOCK

Respectfully submitted,  
  
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**CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8**

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Assistant Commissioner for Patents, Washington, DC 20231 on this 12 day of October, 2001.

  
Thomas F. Hellenthal

Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:

Submitted herewith is/are:

Transmittal Form (1 pg.); Response to Restriction Requirement (2 pgs.); postcard.